Fact Sheet #3 Increase in Beneficiary Contact

County Playbook: Medicaid Managed Care

Potential for Higher Call Volumes & Foot Traffic at the DSS

Change almost always prompts questions. Many Medicaid beneficiaries will turn to their local Department of Social Services (DSS) to get answers. As a result, the local DSS will likely experience higher call volumes and foot traffic. You can anticipate when increased volumes are likely based upon the Medicaid Transformation timelines associated with your county.

The Introduction to Medicaid Transformation – Part 2: Enrollment & Timelines Fact Sheet outlined some of the key milestones most of our beneficiaries will experience in the transition to Medicaid Managed Care. We recommend that the local DSS prepare for an increase in calls and visits around the time that these milestones occur. Please reference the table below for approximate dates we anticipate will result in increased contact. We have also included examples of scenarios to demonstrate why a beneficiary may contact the DSS (or other community partners) during this time. NC Medicaid will provide the local DSS with additional training to help counties prepare for transformation.

| Milestone | Regions 2 and 4 Timeframe to expect increased contact | Regions 1, 3, 5 and 6 Timeframe to expect increased contact | Example Scenario |
|--|--|--|---|
| Enrollment Packets mailed to beneficiaries | Started 7/8/2019 | Starting 10/1/2019* (all should be mailed within 10 Business days) | Joe receives a letter from NC Medicaid explaining that he and his family need to enroll in a health plan. Instead of calling the toll-free number on the form, he calls his caseworker to make sure this is really something he has to do. |
| to beneficiaries | First: Starting 8/13/2019* Second: Starting 11/4/2019* | Starting 11/4/2019* | Angie receives a postcard from NC Medicaid reminding her about Open Enrollment. She remembers seeing something about that a few weeks ago but misplaced her paperwork. She calls the main number for her local DSS to see if they can help. |
| | Starting 12/16/2019* Health Plans will mail Welcome Packets to their members within 7 Business days of plan assignment. | | Lola received mail from NC Medicaid about enrolling in a health plan, but she ignored it. She is auto-assigned to a health plan after Open Enrollment ends. She then receives mail from one of the health plans containing a handbook and an ID card. She calls her Medicaid caseworker to ask if she still has Medicaid. |

^{*}Dates are approximate and subject to change

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BUDGET CONSIDERATIONS:

Periodic increases in call volume and foot traffic may impact your staffing needs. Please consider the following to determine possible implications for your budget.

- Do we have the resources to hire temp staff to support the increase in foot traffic and phone calls?
 (NC Medicaid is reviewing the possibility of 75% reimbursement for temp staff who are updating addresses in NC FAST.)
- Do we have the resources to upgrade staff (ex. clerical staff to Income Maintenance Caseworker/IMC-1) to allow for additional responsibilities to support beneficiaries?
- What is the current volume of calls our office receives on a daily basis? How would a call volume increase of 15%, 20%, or 50% impact the number of reception and triage staff we need?
- What were our call volumes during Open Enrollment for the Federal Marketplace? (This may provide a basis upon which we can estimate call volume during Managed Care Open Enrollment.)

RETURNED MAIL

Most beneficiaries will receive information by mail from the Enrollment Broker and from their Health Plan. The DSS will not see an increase in returned mail due to Medicaid Transformation.

- Mail from the Enrollment Broker will be branded as "NC Medicaid" but will have the return address for the Enrollment Broker. This includes:
 - Enrollment Packets/enrollment forms
 - Reminder postcards about enrollment
 - Notices related to Managed Care status changes and disenrollment
- Mail from the Health Plans will be branded with the Health Plan's name and logo and will have the return address for that plan. This includes:
 - Welcome Packets, Health Plan handbooks, and health plan ID cards for members
 - Provider Directory
 - How to access Care Management Services

Returned mail will be compiled by the Enrollment Broker and the Health Plans and shared with NC Medicaid. More information will be coming soon about how out-of-date addresses will be shared with

Fact Sheets will be updated periodically with new information. Created 5/16/2019. Updated 9/10/2019.

For more information, please visit https://www.ncdhhs.gov/assistance/medicaid-transformation

